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PTO/SB/21 (04-04) (AW 06/2004)

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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/767,663
	Filing Date	January 29, 2004
	First Named Inventor	Yossi Gross
	Art Unit	1614
	Examiner Name	
Total Number of Pages in This Submission 11	Attorney Docket No.	SC&C-100US

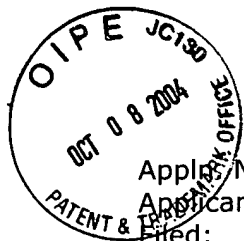
ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/Declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation, Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Return Postcard
Remarks:		

SIGNATURE OF APPLICANT, ATTORNEY OR AGENT			
Firm or Individual Name	Jacques L. Etkowicz	Registration No. (Attorney/Agent)	41,738
Signature			
Date	October 6, 2004		

CERTIFICATE OF TRANSMISSION / MAILING			
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:			
Typed or printed name	Kathleen P. Carney		
Signature		Date	October 6, 2004

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Office, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, ALEXANDRIA, VA 22313-1450.

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**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Applicant No: 10/767,663
Applicant: Yossi Gross et al.
Filed: January 29, 2004
Title: ACTIVE DRUG DELIVERY IN THE GASTROINTESTINAL TRACT
TC/A.U.: 1614
Examiner:

SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Pursuant to 37 C.F.R. §§ 1.97 and 1.98 and to the duty of disclosure set forth in 37 C.F.R. § 1.56, the Examiner in charge of the above-identified application is requested to consider and make of record the references listed on the PTO 1449 (RP) submitted herewith. A copy of the reference listed on the 1449 form is enclosed.

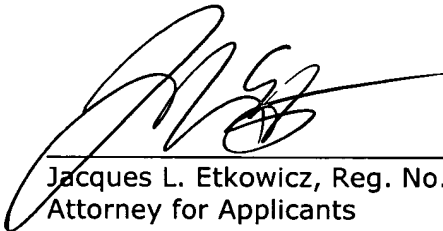
Although the information submitted herewith may be "material" to the Examiner's consideration of the subject application, this submission is not intended to constitute an admission that such information is "prior art" as to the claimed invention.

In accordance with 37 C.F.R. § 1.97(g), the filing of this Information Disclosure Statement shall not be construed to mean that a search has been made.

This Information Disclosure Statement is being filed before mailing of the first Official Action. No first Official Action has yet been received and it is presumed that none has yet been mailed. No fee or statement is required. 37 C.F.R. § 1.97(b).

Respectfully submitted,

RatnerPrestia



Jacques L. Etkowicz, Reg. No. 41,738
Attorney for Applicants

JLE/kpc

Enclosures: PTO Form 1449
(1) Reference
Transmittal Form

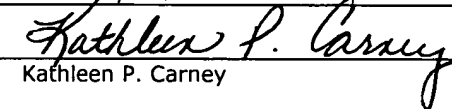
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The Commissioner for Patents is hereby authorized to charge payment to Deposit Account No. **18-0350** of any fees associated with this communication.

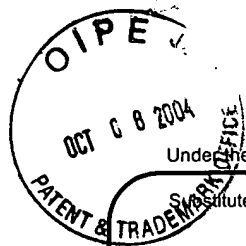
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Kathleen P. Carney

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Substitute for Form 1449B/PTO

**INFORMATION DISCLOSURE
STATEMENT BY APPLICANT**

(Use as many sheets as necessary)

Complete if Known

Application Number 10/767,663

Filing Date January 29, 2004

First Named Inventor Yossi Gross

Art Unit 1614

Examiner Name

Attorney Docket No. SC&C-100US

SHEET 1 of 1

NON-PATENT LITERATURE DOCUMENTS

Examiner Initials*	Cite No. ¹	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published	T ²
		W. H. STEINBERG ET AL. "Heidelberg Capsule I <i>In Vitro</i> Evaluation of a New Instrument for Measuring Intragastric pH" Journal of Pharmaceutical Sciences, Vol. 54, No. 5, May 1965, 772-778	<input type="checkbox"/>
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Examiner Signature		Date Considered	
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*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to Applicant.

¹Applicant's unique citation designation number (optional).

²Applicant is to place a check mark here if English language translation is attached.

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